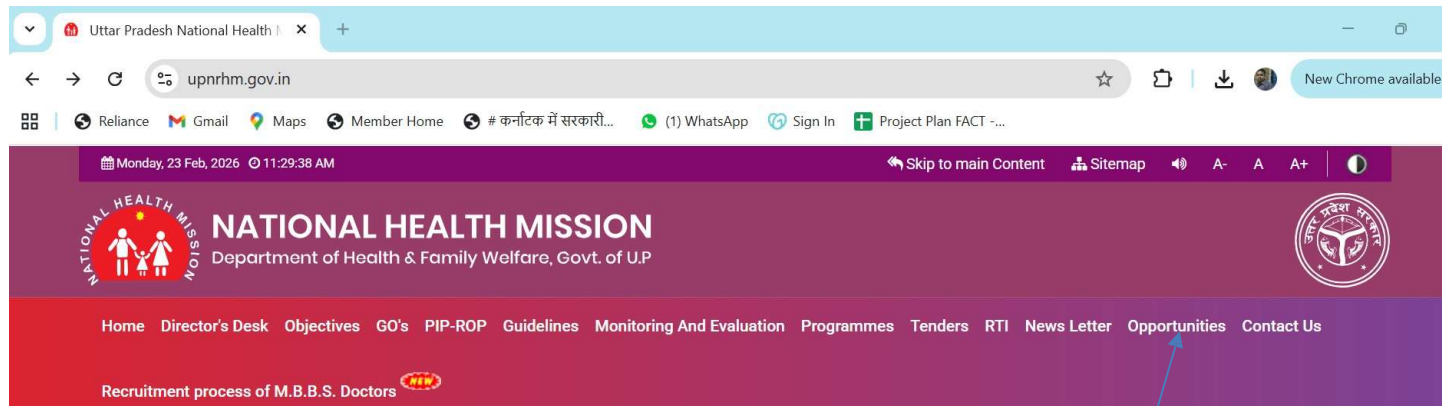


Online Recruitment Application Process for GM Post

To apply for the post of General Manager (GM), kindly go to the official website of NHM UP.



- Click on the Opportunity link on the home page.
- Then click on the “Apply Now” Button against advertisement no.

Recruitment/Career

For any Recruitment related queries: 0522-2630555

Advertisement No.	Advertisement	Start Date	Last Date	View Details	Apply Now
Ref. No: 705/SPMU/NHM/HR/2026-27/1963 Date: 03.07.2026	Application for vacant General Managers positions	05-July-2026	25-July-2026	Detailed Advertisement	Apply Now

- You will be directed to the application portal as follows





NATIONAL HEALTH MISSION, UTTAR PRADESH
Department of Health & Family Welfare, Govt. of U.P.



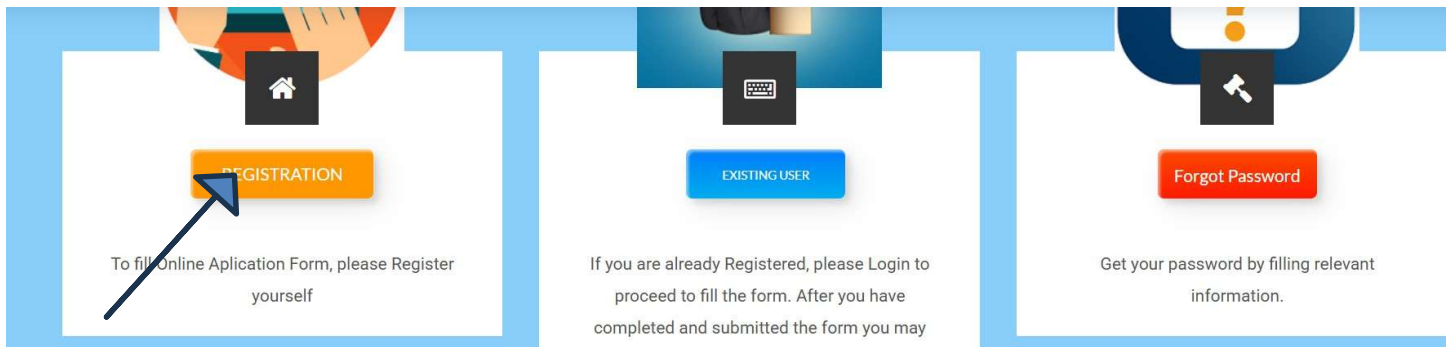
[HOME](#) [ABOUT NHM](#) [ADVERTISEMENT AND HOW TO APPLY](#)

CANDIDATES ARE REQUESTED TO READ THE DETAILED ADVERTISEMENT CAREFULLY BEFORE APPLYING.

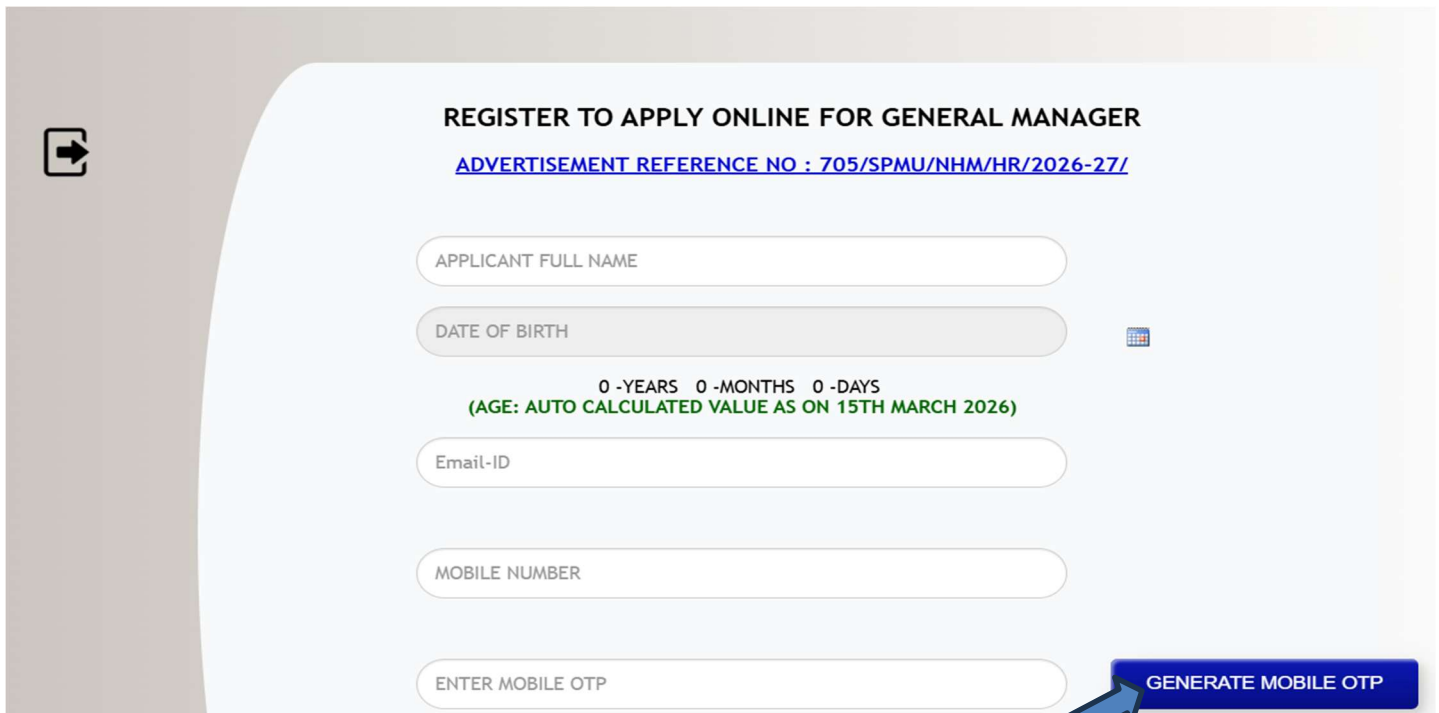


The Online Recruitment Application process consists of the following steps:

- **Step 1:** The applicant is required to enter all basic information such as Name, Date of Birth, Email, Contact number and other details, if applicable. On successful completion of this stage, an acknowledgement for further application and login credentials will be sent to the applicant's email ID and mobile number



- Click on the “Registration” button to start a fresh registration. You will get the screen.



REGISTER TO APPLY ONLINE FOR GENERAL MANAGER

[ADVERTISEMENT REFERENCE NO : 705/SPMU/NHM/HR/2026-27/](#)

APPLICANT FULL NAME

DATE OF BIRTH 

0 -YEARS 0 -MONTHS 0 -DAYS
(AGE: AUTO CALCULATED VALUE AS ON 15TH MARCH 2026)

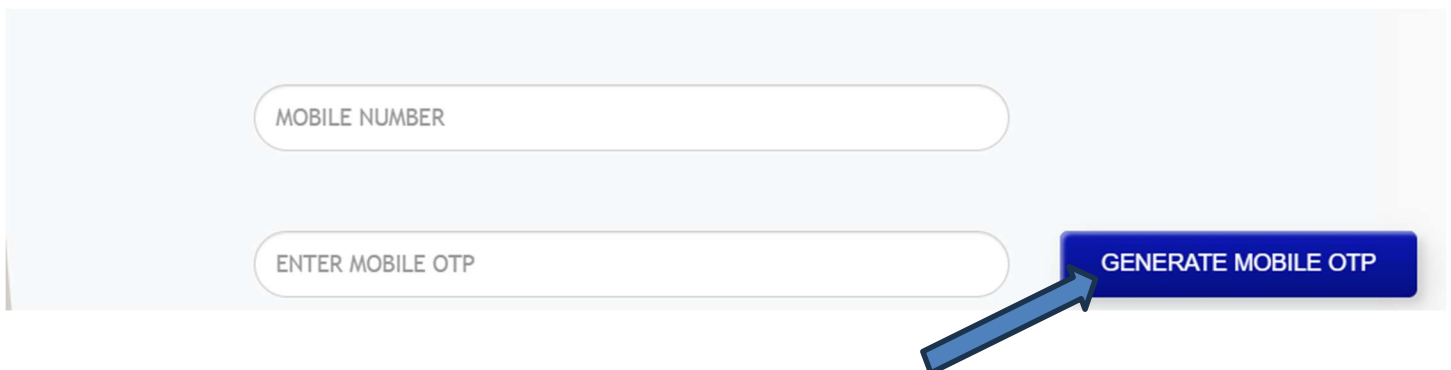
Email-ID

MOBILE NUMBER

ENTER MOBILE OTP

GENERATE MOBILE OTP

- After entering all the required details, you will be asked to generate the mobile OTP.



MOBILE NUMBER

ENTER MOBILE OTP

GENERATE MOBILE OTP

- Generate the mobile OTP and enter the same. Enter the captcha.



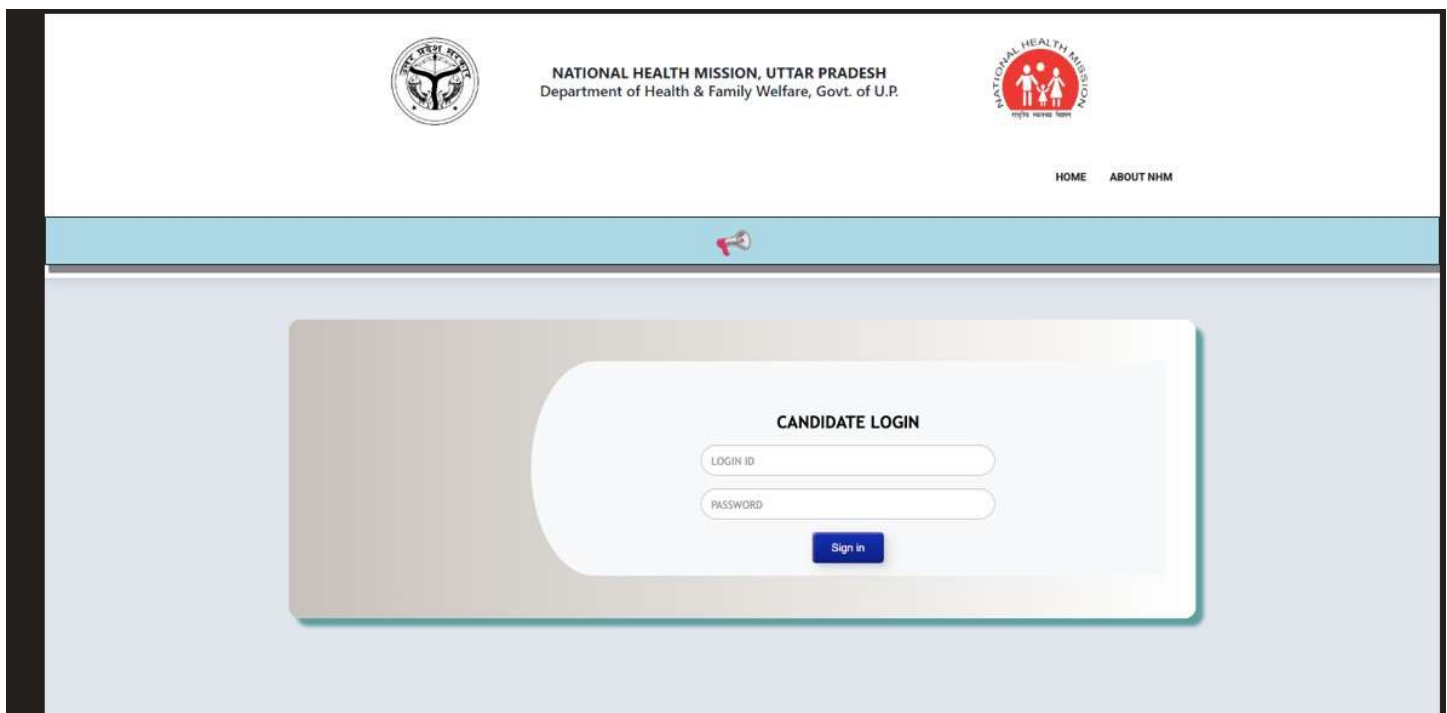
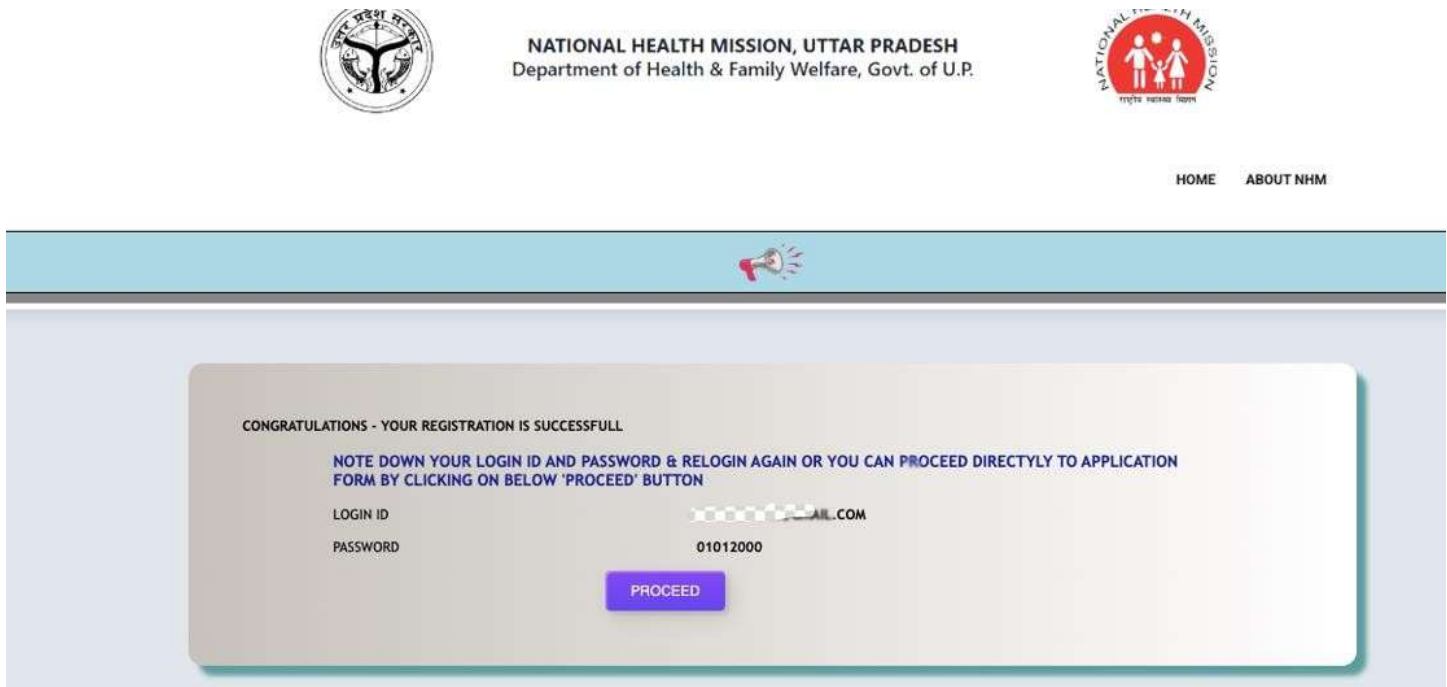
825471

CAPTCHA

[RELOAD CAPTCHA](#)

SUBMIT REGISTRATION FORM

- After submission of the first step, you will be asked to log in with the credentials. Before login, kindly note down your login ID and password.



- Kindly log in with the received credentials. After first login, please change your password
- It is important to remember your login ID and password for the future.

CHANGE PASSWORD

OLD PASSWORD :

OLD PASSWORD

NEW PASSWORD :

NEW PASSWORD

CONFIRM PASSWORD :

CONFIRM PASSWORD

NOTE : PASSWORD SHOULD BE MINIMUM 6 CHARACTERS AT LEAST 1 UPPERCASE ALPHABET, 1 LOWERCASE ALPHABET, 1 NUMBER AND 1 SPECIAL CHARACTER
(EXAMPLE:MANGALAGIRI@123)

Change Password

Reset Password

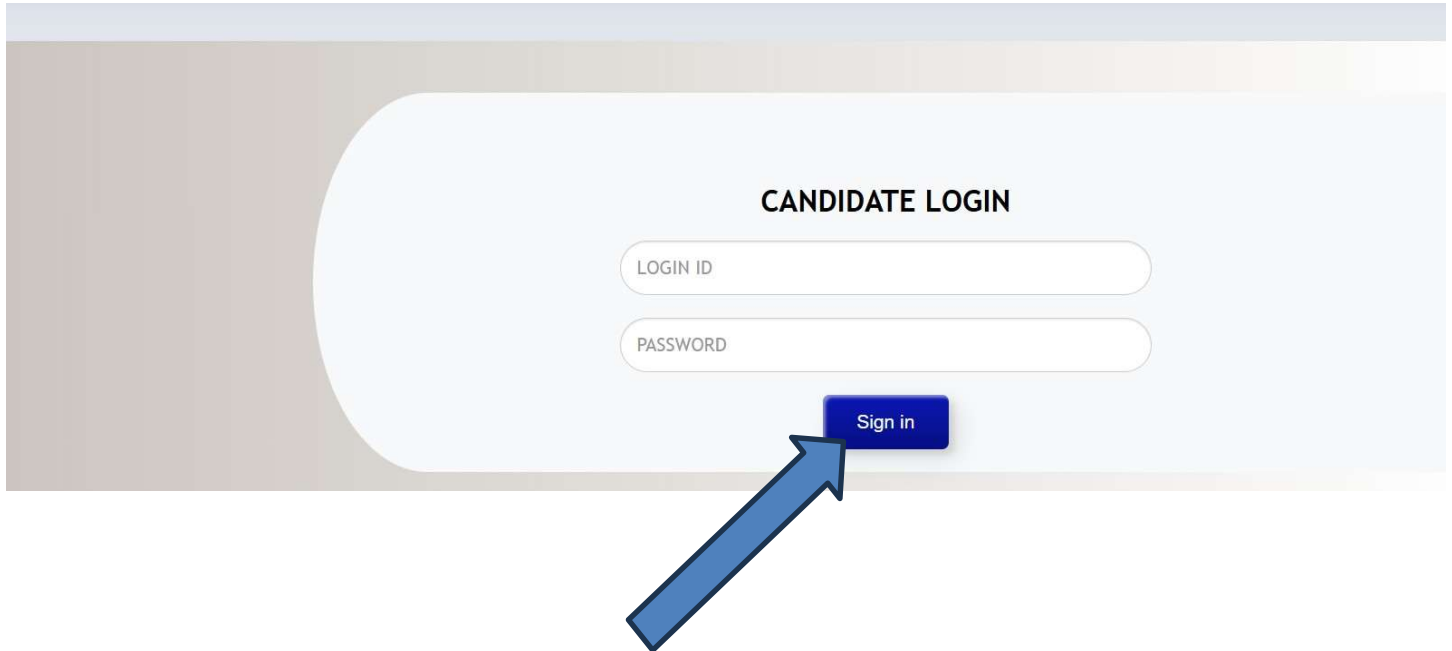
EXIT

- After successfully changing the password, you will get a message as below. Click on OK



Step -2 Fill all the required details -

- Then log in with the new password.



A screenshot of a web application showing a 'CANDIDATE LOGIN' form. The form is set against a light blue background with a subtle pattern. It contains two input fields: 'LOGIN ID' and 'PASSWORD', both with light gray placeholder text. Below these fields is a dark blue 'Sign in' button. A large blue arrow with a black outline points from the bottom left towards the 'Sign in' button.

CANDIDATE LOGIN

LOGIN ID

PASSWORD

Sign in

- Fill all the fields carefully.

REGISTRATION NO : UPNHM/2026/GM/1001

APPLICATION FORM

ALL * FIELDS ARE MANDATORY

NOTE: THE DETAILS BELOW SHOULD BE ENTERED AS IT APPEARS IN THE MATRICULATE CERTIFICATE (CLASS 10TH CERTIFICATE) AWARDED TO YOU. THERE SHOULD NOT BE ANY VARIATION IN FORM OR SPELLING.

*APPLYING FOR

*FULL NAME

*DATE OF BIRTH
(AGE: AUTO CALCULATED VALUE AS ON 15TH MARCH 2026)

*FATHER'S/HUSBAND'S NAME

*MOTHER'S NAME

*GENDER

*MARITAL STATUS

*NATIONALITY

*CATEGORY

COVID EXPERIENCE (QR-BASED EXPERIENCE CERTIFICATE REQUIRED)

☐ I HAVE READ ALL THE PROVISIONS OF NOTICE/ADVERTISEMENT CAREFULLY AND I HEREBY DECLARE THAT THE INFORMATION SUBMITTED BY ME IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE. I SHALL BE LIABLE FOR ANY DISCIPLINARY/PUNITIVE ACTION IN CASE ANY OF THE DETAILS ARE FOUND TO BE INCORRECT. FURTHER I UNDERSTAND THAT MY CANDIDATURE WILL BE CANCELLED IN CASE OF ANY FALSE MISLEADING INFORMATION IS SUBMITTED BY ME.

[SAVE & NEXT](#)

- After filling all the fields, click on the “Save & Next” Button. You will be redirected to the screen below.

CONTACT DETAILS

REGISTRATION NO : UPNHM/2026/GM/1001

ALL * FIELDS ARE MANDATORY

*MOBILE NUMBER

*EMAIL ID

CURRENT ADDRESS

*ADDRESS

*CITY

*STATE/U.T.

*PINCODE

PERMANENT ADDRESS

SAME AS CURRENT ADDRESS ☐

*ADDRESS

*CITY

*STATE/U.T.

*PINCODE

SAVE & NEXT

- After filling in all the fields, click on the “Save & Next” Button. You will be redirected to the screen below.

EDUCATIONAL QUALIFICATION

REGISTRATION NO : UPHIM/2026/GM/1001 POSTNAME: GENERAL MANAGER-ON DEPUTATION

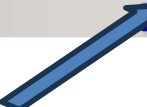
EXAMINATION	BOARD/UNIVERSITY	INSTITUTE/COLLEGE NAME	YEAR AND MONTH OF PASSING	STREAM / SUBJECT	PERCENTAGE
MATRICULATION (10TH)					
			--SELECT--	--SELECT--	
INTERMEDIATE (10+2)					
			--SELECT--	--SELECT--	
ESSENTIAL QUALIFICATION (MBBS/BDS/B.E/B.TECH IN CIVIL ENGINEERING)					
			--SELECT--	--SELECT--	
QUALIFICATION					
DESIRABLE QUALIFICATION					
QUALIFICATION					

ADD MORE QUALIFICATION DETAILS.. ADD ANY OTHER QUALIFICATION 1

WORK EXPERIENCE (11 YEARS IN ANY GOVT. SECTOR)

SR. NO.	NAME OF EMPLOYER	DESIGNATION	ADDRESS OF EMPLOYER	START DATE	END DATE
1					

Add New


SAVE & NEXT

- In the above screen, you need to fill in all the educational qualification & work experience details. Kindly read the advertisement copy carefully for the same. Click on the “Save & Next” Button. You will get the screen.

UPLOAD DOCUMENTS

REGISTRATION NO : UPN11W/2026/GW/1001

DISCLAIMER: THE PHOTOGRAPH AND ALL UPLOADED DOCUMENTS MUST BE CLEARLY VISIBLE. OTHERWISE, YOUR CANDIDATURE WILL BE CANCELLED.

KINDLY UPLOAD RELEVANT DOCUMENTS/PROOFS

*RECENT PASSPORT SIZE COLORED PHOTOGRAPH	Choose File No file chosen (.JPG UPTO 100KB)	
* CANDIDATE SIGNATURE	Choose File No file chosen (.JPG UPTO 100KB)	
*MATRICULATION (10TH) CERTIFICATE	Choose File No file chosen (.PDF UPTO 200KB)	
*INTERMEDIATE (10+2) CERTIFICATE	Choose File No file chosen (.PDF UPTO 200KB)	
*ESSENTIAL QUALIFICATION CERTIFICATE	Choose File No file chosen (.PDF UPTO 200KB)	
*DESIRABLE QUALIFICATION CERTIFICATE	Choose File No file chosen (.PDF UPTO 200KB)	
*WORK EXPERIENCE 1 CERTIFICATE	Choose File No file chosen (.PDF UPTO 200KB)	
*ADDRESS PROOF	Choose File No file chosen (.PDF UPTO 200KB)	
*ID PROOF	Choose File No file chosen (.PDF UPTO 200KB)	
*GRADE PAY DOCUMENT	Choose File No file chosen (.JPG UPTO 100KB)	

SAVE & NEXT

- On this page, please upload all the required documents such as educational qualification documents, work experience documents, photo, signature and all other documents, if applicable. Click on the “Save & Next” button.

- You will get the screen.

APPLICATION FORM :
PERSONAL INFORMATION

APPLICATION NO. :	UPNHM/2026/GM/1001		 
APPLYING FOR:	GENERAL MANAGER-ON DEPUTATION		
NAME:	TEST		
DATE OF BIRTH:	01-01-1980		
FATHER/GUARDIAN NAME:	TESTING		
MOTHER NAME:	TESTING		
MOBILE NUMBER:	8299453112		
EMAIL ID:	TESTNIHM@YOPMAIL.COM		
GENDER:	MALE		
MARITAL STATUS:	UNMARRIED		
NATIONALITY	INDIAN		
CATEGORY:	UR		
COVID EXPERIENCE (QR-BASED EXPERIENCE CERTIFICATE REQUIRED)	NO		
CURRENT ADDRESS:	ADDRESS: STATE/U.T.: CITY: PINCODE:	GOMTI NAGRA UTTAR PRADESH (UP) LUCKNOW 226001	
PERMANENT ADDRESS:	ADDRESS: STATE/U.T.: CITY: PINCODE:	GOMTI NAGRA UTTAR PRADESH (UP) LUCKNOW 226001	

EDUCATION DETAILS

EXAMINATION	BOARD/UNIVERSITY	INSTITUTE/COLLEGE	STREAM/SUBJECT	YEAR OF PASSING	PERCENTAGE
MATRICULATION (10TH)					
	CBSE	JPS	SCIENCE	MARCH-1998	70
INTERMEDIATE (10+2)					
	CBSE	JPS	SCIENCE	MARCH-2000	80
ESSENTIAL QUALIFICATION (MBBS/BDS/B.E/B.TECH IN CIVIL ENGINEERING)					
	MBBS	LU	MBBS	MARCH-2004	50
DESIRABLE QUALIFICATION					
	MBA	LU	MBA	APRIL-2007	60

WORK EXPERIENCE (7 YEARS IN ANY GOVT. SECTOR POST - ESSENTIAL QUALIFICATION)

SL.NO.	NAME OF EMPLOYER	DESIGNATION	START DATE	END DATE
1	NHM	TEST	01-01-2010	04-07-2026

TOTAL EXPERIENCE AS ON 23RD NOV 2023

16 YEAR(S) 6 MONTH(S) 8DAY(S)

UPLOAD DOCUMENTS

MATRICULATION (10TH) CERTIFICATE	UPLOADED
INTERMEDIATE (10+2) CERTIFICATE	UPLOADED
ESSENTIAL QUALIFICATION CERTIFICATE	UPLOADED
DESIRABLE QUALIFICATION CERTIFICATE	UPLOADED
ID PROOF	UPLOADED
WORK EXPERIENCE 1 CERTIFICATE	UPLOADED
ADDRESS PROOF	UPLOADED
GRADE PAY DOCUMENT	UPLOADED

DECLARATION:

I HAVE READ ALL THE PROVISIONS OF NOTICE/ADVERTISEMENT CAREFULLY AND I HEREBY DECLARE THAT THE INFORMATION SUBMITTED BY ME IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE. I SHALL BE LIABLE FOR ANY DISCIPLINARY/PUNITIVE ACTION IN CASE ANY OF THE DETAILS ARE FOUND TO BE INCORRECT. FURTHER I UNDERSTAND THAT MY CANDIDATURE WILL BE CANCELLED IN CASE OF ANY FALSE MISLEADING INFORMATION IS SUBMITTED BY ME.

MODIFY

SUBMIT

At this stage, you can also modify your form details if required by clicking on the “Modify” Button or click on the “Submit” Button to submit the form finally. Please note that after final submission of the form, you will not be able to change/modify any detail. After final submission, kindly take the printout and save the filled form for future reference.

*******ALL THE BEST*******